Omnicare
a CVSHealth company

Therapy Related Care Plan: Casirivimab/Imdevimab Infusion

Date	Problem/Needs	Goal/Expected Outcome	Approaches/Interventions	Responsible Discipline	Review Date	Resolve Date
	Potential for infusion related adverse events as evidenced by: fever, chills, nausea, headache, bronchospasm, hypotension, angioedema, throat irritation, rash including urticarial, pruritus, myalgia, and dizziness	Patient will not exhibit any signs and symptoms of infusion related adverse events	1. Every patient referral must include specific Casirivimab/ Imdevimab acute infusion reaction orders 2. Ensure emergency medications to treat an infusion reaction are immediately available 3. Confirm a patent, functioning vascular access device is in place prior to admixing medication 4. Clinically monitor for signs and symptoms during infusion and for one hour post infusion: • Allergic reactions or anaphylaxis • Fever and chills • Nausea and myalgia • Hypotension • Headache and dizziness • Angioedema and bronchospasm, throat irritation • Rash including urticarial and pruritus 5. Monitor vital signs prior to infusion, and every 15 minutes during infusion and for one hour following completion of infusion 6. Stop infusion for signs and symptoms of clinically significant hypersensitivity reaction or anaphylaxis occurs 7. Report any adverse events to FDA MedWatch and the pharmacy			
	Potential for knowledge deficit regarding infection	Patient/significant other(s) verbalizes signs/symptoms of infection to report to nurse	1. Educate patient/significant other(s) on rationale for Casirivimab/Imdevimab, potential adverse effects, and s/s to report to nurse 2. Provide patient/family Regeneron's Patient Fact Sheet, and answer questions.			

Patient: _____ **Room #:** _____